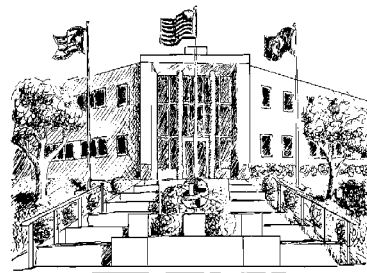


CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD
PARMA, OH 44129

MON - FRI
8:30 AM TO 4:30 PM

PHONE: (440) 885-8045 – FAX: (440) 885-8044



Michael P. Mason
Tax Commissioner

D **ESTIMATE OF QUARTERLY TAX DUE**
Quarterly Billing for **Estimated** Parma Income Tax for Year **Quarter**

Account Number	FID Number	SSN Number	Due Date	Amount Due

Estimated Tax for The Year

Estimated Tax Due as of
Less Amount Previously Paid: (-)
Balance Due:

**PENALTY AND INTEREST MUST BE ASSESSED WHEN FILING ANNUAL RETURN
IF 80% OF TAX OWED WAS NOT PAID ON DECLARATION BY DECEMBER 31ST.**

RETAIN THIS UPPER PORTION FOR YOUR RECORDS. DETACH AND RETURN THE FORM BELOW
WITH YOUR PAYMENT IN THE ENCLOSED ENVELOPE

D **ESTIMATE OF QUARTERLY TAX DUE**
Quarterly Billing for **Estimated** Parma Income Tax for Year **Quarter**

Account Number	FID Number	SSN Number	Due Date	Estd Tax For the Year	Amount Due

Make Check Payable To: CITY OF PARMA DIV OF TAX

Mail Check To: CITY OF PARMA
PO BOX 94734
CLEVELAND, OH 44101-4734

IF YOU HAVE MOVED GIVE US THE DATE _____ AND YOUR NEW ADDRESS